Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Check this box if no longer subject to	STATE
Section 16. Form 4 or Form 5	_
obligations may continue. See	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  SHERRILL JOSEPH H JR						2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [ BCRX ]									ck all applic	cable) or	g Person(s) to Issu 10% Ow		ner
(Last) 2190 PA	,	First) LAKE DRIVE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/16/2007											Officer (give title below)		Other ( below)	specify	
(Street) BIRMIN (City)	GHAM A		35244- (Zip)		4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tak	ole I - Non	-Deriva	ative	e Se	curities	s Ac	quired,	Dis	posed o	of, or Be	nefic	ially	Owned				
Date				2. Transa Date (Month/D		ear)	2A. Deemed Execution Date, if any (Month/Day/Yea		3.		ties Acquii d Of (D) (In:	red (A) str. 3, 4	4 and Securitie Benefici		es Fo ally (D Following (I)		Ownership orm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) o	r Pri	ice	Transact (Instr. 3 a	ion(s)			(111501.4)
			Table II - I						uired, D s, option						Owned	,		<u> </u>	1
Derivative Security	2. Conversio or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date, Tr	ransaction code (Instr.				6. Date Ex Expiration (Month/Da	Date	•	7. Title ar of Securi Underlyir Derivativ (Instr. 3 a	ties ng e Secu ind 4)	rity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y O D OI (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				C	ode	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amo or Num of Shar	ber					
Stock	\$7.98	05/16/2007			A		15,000		06/16/200	7 (	05/16/2017	Common	15,0	000	\$7.98	15,000		D	

## Explanation of Responses:

1. Automatic non-employee director grant

Mike Richardson by POA

05/17/2007

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.